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PTO/SB/01 (8-95)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 8/95	U.S. Department of Commerce Patent and Trademark Office	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Attorney Docket Number</td> <td style="width: 50%;">C 2576 COGG</td> </tr> <tr> <td>First Named Inventor</td> <td>KISCHKEL, Ditmar</td> </tr> <tr> <td colspan="2" style="text-align: center;">COMPLETE IF KNOWN</td> </tr> <tr> <td>Application Number</td> <td>10/278,835</td> </tr> <tr> <td>Filing Date</td> <td>10/23/2002</td> </tr> <tr> <td>Group Art Unit</td> <td></td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> </table>	Attorney Docket Number	C 2576 COGG	First Named Inventor	KISCHKEL, Ditmar	COMPLETE IF KNOWN		Application Number	10/278,835	Filing Date	10/23/2002	Group Art Unit		Examiner Name	
Attorney Docket Number	C 2576 COGG															
First Named Inventor	KISCHKEL, Ditmar															
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Application Number	10/278,835															
Filing Date	10/23/2002															
Group Art Unit																
Examiner Name																
<h2 style="margin: 0;">DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</h2>																
<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;"> <input type="checkbox"/> Declaration Submitted with Initial Filing </div> <div style="text-align: center;"> OR </div> <div style="text-align: center;"> <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing </div> </div>																

As a below named inventor, I hereby declare that:
 My residence, post office address, and citizenship are as stated below next to my name.
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below)
 of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SOLID DETERGENT COMPOSITIONS AND METHODS OF PREPARING THE SAME

(Title of the Invention)

The specification of which
☒ is attached hereto
 OR
☒ was filed on (MM/DD/YYYY) **10/23/2002** as United States Application Number or PCT International
 Application Number **10/278,835** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any
 Amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119(a)-(d) or § 385(b) of any foreign application(s) for patent or inventor's
 certificate, or § 385(e) of any PCT international application which designated at least one country other than the United States of America, listed below
 and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application
 having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority	Certified Copy Attached?	
			Not Claimed	YES	NO
101 52 142.1	DE	10/23/2001	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 118(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional
 application numbers
 are listed on a
 supplemental priority
 sheet attached hereto.

Burden Hour Statement: This form is estimated to take 4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

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DECLARATION				Page 2	
<small>I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.</small>					
U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)		
<input type="checkbox"/> Additional U.S. or PCT International application numbers are listed on a supplemental priority sheet attached hereto.					
<small>As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:</small>					
<input type="checkbox"/> Firm Name 		<input type="checkbox"/> Customer Number or label 			
<input checked="" type="checkbox"/> List Attorney(s) and/or agent(s) name and registration number below:					
Name	Registration Number	Name	Registration Number		
John E. Drach Steven J. Trzaska	32,891 36,296	Aaron R. Ettelman Henry E. Millson, Jr.	42,516 18,980		
<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.					
<small>Please direct all correspondence to:</small>		<input checked="" type="checkbox"/> Customer Number or label	23657	<input type="checkbox"/> OR <input checked="" type="checkbox"/> Fill in correspondence address below	
Name	Aaron R. Ettelman				
Address					
Address					
City		State		Zip	
Country		Telephone	610-278-4930	Fax	610-278-4971
<small>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</small>					
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Ditmar	Middle Initial		Family Name	Kischkel
Inventor's Signature				Date	20/11/02
Residence: City	Monheim	State		Country	Germany
Post Office Address	Schwanenstrasse 20				
Post Office Address					
City	40789 Monheim	State		Country	Germany
		Zip		Applicant Authority	
<input checked="" type="checkbox"/> Additional Inventors are being named on supplemental sheet(s) attached hereto					

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C 2576 COGG

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name	Manfred			Middle Initial		Family Name	Weuthen			Suffix e.g. Jr.		
Inventor's Signature	<i>Manfred Weuthen</i>						Date	14/11/02				
Residence: City	Langenfeld			State		Country	Germany			Citizenship	Germany	
Post Office Address	Louvèclennesstrasse 33											
Post Office Address												
City	40764 Langenfeld			State		Zip		Country	Germany		Applicant Authority	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name	Michael			Middle Initial		Family Name	Elsner			Suffix e.g. Jr.		
Inventor's Signature	<i>Michael Elsner</i>						Date	25/11/02				
Residence: City	Helliggenhaus			State		Country	Germany			Citizenship	Germany	
Post Office Address	Huelsbecker Platz 7											
Post Office Address												
City	42579 Helliggenhaus			State		Zip		Country	Germany		Applicant Authority	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name				Middle Initial		Family Name				Suffix e.g. Jr.		
Inventor's Signature							Date					
Residence: City				State		Country				Citizenship		
Post Office Address												
Post Office Address												
City				State		Zip		Country			Applicant Authority	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name				Middle Initial		Family Name				Suffix e.g. Jr.		
Inventor's Signature							Date					
Residence: City				State		Country				Citizenship		
Post Office Address												
Post Office Address												
City				State		Zip		Country			Applicant Authority	

☐ Additional inventors are being named on supplemental sheet(s) attached hereto

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January 22, 2003

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